

Staff Data and Materials on
Supplemental Security Income
(SSI) Disability Proposals

COMMITTEE ON FINANCE
UNITED STATES SENATE

RUSSELL B. LONG, *Chairman*

Data and Materials Prepared by the Staff of the
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SUBCOMMITTEE ON PUBLIC ASSISTANCE

DANIEL PATRICK MOYNIHAN, *Chairman*



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I. INTRODUCTION

In recent years there has been serious and growing concern about the two disability programs administered by the Social Security Administration. These programs—Disability Insurance (DI) under title II of the Social Security Act and Supplemental Security Income (SSI) disability under title XVI—employ the same definition of disability and also use the same administrative mechanisms and procedures. There has been increasing criticism of the programs for weaknesses in administration. In addition, questions have been raised about the appropriateness of the definition, and about the failure of the programs to remove individuals from disability status through rehabilitation and movement into employment.

The problems of the title II program have been the subject of study by the House Social Security Subcommittee for the last four years, and a bill dealing with the program was approved by that Subcommittee on September 15, 1978. The Administration has established a special task force to study disability under both DI and SSI; its findings and recommendations are expected early in 1979. The General Accounting Office has also undertaken a number of special studies of the programs and has issued several reports on its findings.

Two bills which would amend SSI disability legislation have been passed by the House and are now pending before the Committee on Finance. Both bills would affect SSI applicants and recipients with medical impairments who also work and have earnings. H.R. 12972 would modify one of the key elements of the definition of disability used in the SSI program and would also modify the way in which benefit amounts are computed by allowing a work expense disregard. H.R. 10848 would allow a small number of individuals to reestablish their SSI disability payment status on a presumptive basis.

The following materials describe these bills and their effects on the disability program. They also provide a brief description of related legislative proposals, as well as relevant background information.

II. DISCUSSION OF PENDING LEGISLATION

A. Description of H.R. 12972

Change in definition of disability.—The definition of disability in present law for both title II and title XVI provides that an individual shall be considered disabled “if he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than twelve months.” The law directs the Secretary of HEW to prescribe criteria for determining when services performed or earnings derived from services demonstrate an individual’s ability to engage in substantial gainful activity (SGA). A person whose

services or earnings meet these criteria cannot be found disabled. By regulation, the Secretary establishes a dollar amount of earnings—currently \$240 a month—which is used in determining whether an individual is capable of engaging in substantial gainful activity. Thus, as the term is now applied, an individual would be found “not disabled” if he earns or if he has the capacity to earn as much as \$240 a month (\$2,880 a year), even if he has a serious impairment.

Under H.R. 12972 an individual could be found “not disabled” on the basis of his earnings capacity only if he were unable to earn as much as the Federal SSI “breakeven point” not counting a general \$20 disregard). The monthly SSI breakeven point is now \$443 for a single individual and \$633 for an individual with an eligible spouse. These amounts would be further increased under the bill by double the amount of any work expenses, plus double the amount spent for attendant care. Thus the SGA level for a single individual with earnings would be at least \$443 a month, but would in fact vary from individual to individual depending on the amount of claimed expenses and marital status. A single individual with monthly expenses of \$150 would have an SGA level of \$743 a month or \$8,916 a year. If the individual had an eligible spouse his SGA level would be \$933 a month or \$11,196 a year. (See the section on “The Work Expense Provision of H.R. 12972” p. 8, which describes how the breakeven point is calculated.)

Disregard of work expenses.—Present law provides that in determining eligibility for and the amount of SSI benefits, there shall be excluded the first \$65 of monthly earnings, plus 50 percent of earnings above this amount. The \$65 a month exclusion was established as a standard amount to take account of work expenses of all aged, blind and disabled recipients with earnings. These disregard provisions have the effect of establishing a Federal SSI breakeven point of \$443 a month for an individual, and \$633 for a couple. If an individual (or couple) has earnings above the breakeven point, he is not eligible for any Federal benefit. Blind recipients are, in addition, entitled to a disregard of amounts spent as work expenses. This provision has the effect of raising the breakeven point for blind persons who have work expenses, thus increasing the amount of earnings that a blind individual may have and still retain SSI eligibility.

H.R. 12972 would extend this work expense allowance to the disabled (but not to the aged), thus allowing disabled recipients as well as blind recipients to claim itemized deductions for “expenses reasonably attributable to the earning of income” in determining their eligibility for SSI.

Disregard of the cost of attendant care.—Under present law there is no provision for the exclusion of the costs of attendant care for SSI recipients who have earnings. H.R. 12972 would require the disregard from earnings of blind and disabled SSI applicants and recipients of amounts necessary (as determined by the Secretary) to pay the costs of attendant care. The individual would be eligible for the disregard if his condition results in a functional limitation requiring assistance in order for him to work, whether or not the assistance is also needed to carry out his normal daily functions.

Cost of H.R. 12972.—Any estimate of the cost of H.R. 12972 is likely to be somewhat tenuous. There is a lack of certain important data on the current SSI caseload. For example, program statistics show that there are significant numbers of disabled SSI recipients who leave

the rolls each year. However, the Social Security Administration has no data to show the reasons why these cases are terminated, and, therefore, how many of them may have left the rolls for reasons relating to the performance of substantial gainful activity. There is also little basis for anticipating what use would be made of the provision for excluding work expenses and the cost of attendant care in determining SSI benefit payments and in determining the SGA level. Ordinary work expenses (lunches, taxes, union dues, usual modes of transportation, etc.) may not involve very large amounts, but extraordinary expenses for items such as attendant care could be high in some individual cases. Most importantly, it is extremely difficult to anticipate what effect the change in the substantial gainful activity amount, and therefore in the definition of disability, would have on the number of persons who would be determined to be disabled. (Many persons are now denied benefits because of their *ability* to engage in substantial gainful activity—a highly individualized finding. The cost of the proposal would depend upon how many of them would be found eligible under a different meaning of “substantial gainful activity.”)

The Congressional Budget Office has estimated the first year cost of the bill to be \$114 million, increasing to \$181 million over a five-year period. In the first year CBO estimates the costs to be distributed as follows: (1) increased SSI costs due to liberalization in the SGA test—\$28 million, (2) medicaid increases due to additional SSI recipients—\$30 million, and (3) increased SSI costs due to work expense deductions—\$56 million.

In addition to the difficulty of estimating the direct costs of the provision for the SSI program, there is also a question of its impact on the title II disability insurance program. While H.R. 12972 changes the meaning of “substantial gainful activity” only with respect to the SSI program, the same term is used—without legislative definition—in the title II program. Apart from the costs which would be involved if the Department found it necessary or desirable to modify the title II meaning of that term to conform to that in H.R. 12972, the actuarial office of the Social Security Administration estimates some spillover impact on the costs of that program, as is indicated in the memorandum below.

JUNE 16, 1978.

MEMORANDUM FROM FRANCISCO R. BAYO, DEPUTY CHIEF ACTUARY,
SOCIAL SECURITY ADMINISTRATION, ON EFFECT OF H.R. 12701
AND H.R. 10848 ON DI COSTS

Under H.R. 12701 (Keys) the SGA level for title XVI is defined as the level at which earnings alone would cause ineligibility for a Federal SSI benefit because of the income test. The bill also excludes from earned income for the SSI income test (1) any work-related expenses and (2) the expense of providing attendant care for the severely disabled. The resulting SGA levels (about \$400–\$1,000 per month depending on work expenses and need for attendant care) would be significantly higher than the present level (\$240 per month in pending regulations).

Under H.R. 12701, a person could establish eligibility to SSI benefits while still working. We believe that as a result, applications for DI benefits would increase because the applicant would have the knowledge that his SSI benefits would continue while his DI application is being processed.

DI benefit terminations could also increase under H.R. 12701. The higher title XVI SGA amount could encourage some disability beneficiaries to work above the title II SGA, since they would know that the continuing SSI entitlement could make up for some of the DI benefit lost.

We estimate that the net effect of H.R. 12701 would be to increase DI long-range cost by .05 percent of taxable payroll. This estimate is based on the intermediate assumptions of the 1978 Trustees Report.

Since H.R. 12701 would result in higher SGA levels under title XVI than under title II, it is likely that the title II SGA would be increased to conform with title XVI. If this should happen in the near future, the long-range cost of the DI program would increase by an additional 0.10 percent of taxable payroll for a total cost of 0.15 percent of taxable payroll.

Under H.R. 10848 (Stark), persons applying for SSI disability benefits who had been previously entitled to title XVI or title II benefits within five years preceding the date of current application would receive benefits based on presumptive disability. This provision would apply only to beneficiaries whose initial entitlement was terminated because of SGA. We estimate that the effect of H.R. 10848 on long-range DI cost would be negligible (less than .005 percent of taxable payroll).

B. Description of H.R. 10848

Presumptive eligibility for certain former recipients.—Under present law if an individual loses eligibility for SSI disability benefits because of performing substantial gainful activity, he is required to reapply as a new applicant and to undergo a complete disability evaluation before SSI payments can be resumed. H.R. 10848 would permit SSI payments to be resumed on a presumptive basis pending a formal determination of disability in any case where the claimant had been receiving disability payments within the last five years but had his eligibility terminated because of performing substantial gainful activity. (The individual would still be required to meet SSI eligibility requirements relating to income and resources.) If the formal determination found the individual not to be disabled, he would be required to repay the amounts received as a result of this provision.

Cost of H.R. 10848.—The Congressional Budget Office (CBO) estimates that the cost of the amendment would be negligible. According to CBO's analysis, it is expected that few persons who leave the SSI rolls because of engaging in substantial gainful activity will reapply for benefits within the next five years, and that most of those considered presumptively disabled will be determined to be disabled and eligible for payments. Payments to those who do not qualify as disabled would be subject to recovery as overpayments. The Social Security Administration actuary estimates (in the memorandum printed above) that this provision would have a negligible impact on the title II disability insurance program.

C. How H.R. 12972 Affects the Definition of Disability

H.R. 12972 makes two interrelated changes in the SSI disability program. The first change modifies the definition under which an individual is determined to be disabled or not disabled. The second change (which is incorporated by reference into the first change) adds

a specific allowance for work expenses into the formula for determining how a disabled individual's income affects his benefit amount.

The definition of disability.—The Social Security Act under present law uses an identical definition of disability for purposes of both the disability insurance program under title II of the Act and the SSI disability assistance program under title XVI of the Act.

The definition in the law reads as follows:

SEC. 1614. (a) * * *

(3)(A) An individual shall be considered to be disabled for purposes of this title if he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than twelve months (or, in the case of a child under the age of 18, if he suffers from any medically determinable physical or mental impairment of comparable severity).

(B) For purposes of subparagraph (A), an individual shall be determined to be under a disability only if his physical or mental impairment or impairments are of such severity that he is not only unable to do his previous work but cannot, considering his age, education, and work experience, engage in any other kind of substantial gainful work which exists in the national economy, regardless of whether such work exists in the immediate area in which he lives, or whether a specific job vacancy exists for him, or whether he would be hired if he applied for work. For purposes of the preceding sentence (with respect to any individual), "work which exists in the national economy" means work which exists in significant numbers either in the region where such individual lives or in several regions of the country.

(C) For purposes of this paragraph, a physical or mental impairment is an impairment that results from anatomical, physiological, or psychological abnormalities which are demonstrable by medically acceptable clinical and laboratory diagnostic techniques.

(D) The Secretary shall by regulations prescribe the criteria for determining when services performed or earnings derived from services demonstrate an individual's ability to engage in substantial gainful activity. Notwithstanding the provisions of subparagraph (B), an individual whose services or earnings meet such criteria, except for purposes of paragraph (4), shall be found not to be disabled.

This definition does not establish any level of severity of an individual's medical condition as a test of whether or not he is disabled. Instead, the definition requires that there be present some medically determinable impairment and that that impairment be found to preclude the individual from engaging in "substantial gainful activity." The concept of "substantial gainful activity" is, therefore, a key element in the definition of disability. Two individuals with identical medical conditions might properly receive different decisions as to whether or not they are disabled. Considering each individual's voca-

tional background (education, experience, etc.), one may reasonably be found able to get a job at the substantial gainful activity level while the other may not.

Although the definition of disability in the Act does not prescribe the severity of impairments for purposes of determining disability, the administering agency does utilize certain presumptive rules which are related to severity of impairments. Four levels of severity are recognized:

1. *Slight impairment*.—Certain medical conditions are so minimally disabling that the agency presumes they could in no case prevent an individual from engaging in substantial gainful activity. Claims are therefore denied without any actual assessment of the question of whether the individual can or cannot engage in substantial gainful activity. This concept is, however, not well defined and there appears to be a significant difference in how it has been applied at different times. (See table 1).

2. *Meets the listings*.—Certain disabilities are so severe medically that the agency presumes that they preclude any individual from engaging in substantial gainful activity. This presumption permits a claim to be allowed without the necessity for a specific individualized finding of whether the individual is or is not capable of performing substantial gainful activity. However, an individual whose disability falls in this category will be denied or terminated if he does, in fact, engage in employment which constitutes substantial gainful activity. This presumption is the most clearly defined area of disability determination since it is based on "listings" of very specific medical conditions which are set forth in great detail in agency regulations.

3. *Equals the listings*.—The agency permits the same presumptions as in the "meets the listings" category to be applied where the persons adjudicating the claim find a medical impairment which is not included in the listings but which is, in their judgment, of sufficient severity that it is the equivalent of conditions which are in the listings. Thus, an individual with such a condition would be found disabled unless he is, in fact, engaging in substantial gainful activity. This category is less well defined than the "meets the listings" category since it requires an individual judgmental decision on the question of equivalence.

4. *Substantial gainful activity (capacity)*.—Where a claim cannot be denied on the grounds that the impairment is slight or that the individual is in fact working at a substantial gainful activity level, but cannot be allowed on the grounds that it meets or equals the listings, the issue of allowance or denial must be resolved on the factual situation as applied to the definition in the law: That is, does this individual's impairment, considering his vocational situation (age, education, and work experience) prevent him from engaging in substantial gainful activity? This is a highly individualized and judgmental area. At the present time about 25 percent of disability allowances involve an evaluation of vocational factors.

TABLE 1.—PERCENTAGE DISTRIBUTION OF DISABLED ADULTS DENIED SSI PAYMENTS BY REASON FOR DENIAL, JANUARY 1974 TO JULY 1975 AND JANUARY TO DECEMBER 1977

Reason for denial	January 1974 to July 1975	January- December 1977
Total.....	100.0	100.0
Excess countable income.....	13.1	13.3
Inmate of public institution.....	1.1	.8
Applicant is outside United States.....	(¹)	(¹)
Excess resources.....	5.5	4.4
Failed to file for other benefits.....	.1	.1
Not a citizen or lawfully admitted alien...	(¹)	.1
Medical development.....	74.9	76.6
Capacity for substantial gainful activity.....	46.3	30.6
Employed despite impairment.....	.9	.6
Lack of severity of impairment.....	14.8	30.5
Impairment not expected to last 12 months.....	6.3	8.5
Insufficient medical evidence.....	6.5	6.3
Applicant refuses prescribed treatment without good cause.....	(¹)	(¹)
Voluntary withdrawal from program.....	1.0	.8
Failure to pursue claim.....	4.1	3.5
Other.....	.1	.4

¹ Less than 0.5 percent.

Source: Data provided by Social Security Administration.

Impact of H.R. 12972.—H.R. 12972 modifies the concept of “substantial gainful activity” by increasing the dollar level which is presumed to indicate substantial gainful activity. For individuals with severe disabilities which meet or equal the listings this change would permit them to obtain employment at a higher level of earnings than is now possible without losing their entitlement to SSI benefits (and possibly other benefits such as medicaid and social services). It would also permit initial eligibility for any such severely disabled individuals who are not now on the benefit rolls because they are, in fact, working at levels above the current interpretation of substantial gainful activity.

For individuals who have less severe disabilities, the change would seem to permit a finding of disability on the basis of a less severe combination of medical and vocational factors than is now the case. (With a less severe disability, it must be shown that the individual does not have the capacity for employment paying \$240 per month—the present interpretation of substantial gainful activity. Under the bill, an individual could qualify if he could show inability to earn a higher level of income.)

Substantial gainful activity under H.R. 12972.—Although substantial gainful activity is a key part of the present definition of disability, the law does not specify what constitutes “substantial gainful activity.” The Department has, by regulation, established a dollar earnings level which will (in the absence of rebutting evidence such as a showing that the earnings are subsidized) lead to a finding of “substantial gainful activity”. This dollar level has been increased from time to time in the past. At present, the level in use is \$240 per month. H.R. 12972 would, for purposes of the SSI program, establish it at the level of earnings which would reduce the SSI benefit payable to zero after taking into account the various income disregard provisions (including the bill’s newly added work expense disregard).

The level of earnings which would constitute substantial gainful activity would vary for individuals and couples, since benefit levels vary for these two categories. Substantial gainful activity would also differ in meaning depending upon work expense levels. For a severely disabled individual who begins to engage in work activity, the meaning of substantial gainful activity would be determined by taking into account his benefit level and his individual work expenses. It is not entirely clear how the work expense factor would be applied in determining the eligibility of a less severely disabled person who is not in fact working but who alleges incapacity for substantial gainful activity, possibly by using some average work expense amount.

Using the average work expense amount now claimed by blind individuals, the substantial gainful activity level for a disabled individual who has no eligible spouse would be \$697 monthly; for a disabled individual who has an eligible spouse the substantial gainful activity level would be \$887 monthly.

D. The Work Expense Provision of H.R. 12972

H.R. 12972 requires that “an amount equal to any expenses reasonably attributable to the earning of any income” be disregarded in determining income eligibility for SSI disability benefits. This language is identical to language already in the SSI law with respect to blind persons, and the legislative history of H.R. 12972 in the House of Representatives indicates that it is the intention that the new provision be applied to the disabled in the same way as the existing provision now applies to the blind.

Treatment of work expenses for the blind.—The Social Security Claims Manual gives general directions to claims representatives on how to handle claims for work expenses. It states that “An individual eligible on account of blindness and working may deduct the amount of his ordinary and necessary expenses attributable to his earning of the income.” In addition, “There is no specific ceiling on the dollar amount of expenses which may be deducted; however, the amount must be reasonable and not exceed the amount of the earnings of the blind persons from his work in the quarter involved. Expenses are deductible as paid.” The term “reasonable” is not defined.

The manual directs the claims representative to give information to recipients that would encourage them to take advantage of payments on an installment basis: “The exclusion of earned income cannot exceed the amount of earned income in this period, so that any unused portions of the exclusions cannot be carried over for use in subsequent

quarters. Inform blind individuals of this in the event they can arrange their payments for large-scale expenses in a way to benefit as much as possible from the exclusions."

The manual describes three categories of work expenses and gives examples in each category. These include:

(1) transportation to and from work, including the actual cost of bus or cab fare, cane travel instruction, seeing-eye dog and his upkeep, and private automobile (15 cents a mile);

(2) job performance, including braille instruction, child care costs, equipment needed on job, lunches, reader, income taxes, FICA taxes, uniforms and care of them, and others; and

(3) job improvement, including key punch training, computer program training course, or stenotype instruction for blind typist.

According to the manual, an expense need not relate directly to the blindness of the worker to be deductible. However, expenses for "life maintenance" are not work related and cannot be deducted from income. Examples of life maintenance items are food, self-care, life insurance, etc.

Recipients are to be told to maintain records of expenses, and that they must produce evidence of expenses when they are requested to do so. The manual states that "The individual will be requested to submit receipts, bills, etc. to substantiate all such expenses. However, allegations regarding transportation expenses and lunches may be accepted without verification if they appear to be reasonable."

Experience with the work expense provision for the blind.—The provision allowing work expense deductions for the blind has been in the law since its enactment. Based on available data, the percent of the blind with earnings who claimed work expenses grew from 38 percent in December 1975 to 54 percent in December 1977. The average monthly amount of excludable work expenses increased from \$108 in 1975 to \$127 2 years later. Although there are no current data showing the range of work expenses, data for 1975 show that 40 percent of the 1,846 individuals with work expenses claimed monthly expenses of under \$50. Twenty-eight percent claimed expenses of between \$50 and \$100, 16 percent claimed between \$100 and \$150, 9 percent claimed between \$150 and \$199, and 7 percent claimed \$200 and over.

Background information on work expense legislation.—Under present law the blind, who compose less than 2 percent of the SSI population, are accorded special treatment through the provision for individual itemized work expense deductions. H.R. 12972 would expand this provision to the disabled, thus encompassing in total about 52 percent of the current SSI population. Only the aged, as a category, would be denied this individualized treatment. The language allowing itemized work expenses for the blind (and now proposed for the disabled) is identical to the work expense disregard provision in the aid to families with dependent children legislation. (The AFDC provision, however, would be eliminated under legislation reported by the Committee on Finance—H.R. 7200).

The work expense provision in the calculation of SSI benefits.—Under the proposed work expense provision, an individual's eligibility for, and amount of, benefits would be directly affected by whether he claimed work expenses and the amount of the claim. Under present law an

individual with earnings and no other income is eligible for benefits until his earnings reach \$433 a month, or, for a couple, \$633. (However, after a 9-month trial work period, earnings above \$240 will generally result in a finding that the individual is no longer disabled.) The SSI earnings disregard operates in such a way, however, that each \$1 of work expenses increases by \$2 the amount of earnings which a person may have and retain eligibility for benefits. Thus, if a disabled individual had work expenses of \$127 a month (the average amount for the blind for December 1977), he would retain eligibility for benefits until his earnings reached \$697 (\$887 for a couple). Eligibility for benefits would, in most cases, also mean eligibility for medicaid and available social services. Thus, whether an individual had an allowable work expense could be a matter of great importance to him.

As indicated above, there is no limit on allowable work expenses under the present work expense provision for the blind. Each claims representative in a district office must decide whether the expense is "reasonable," or "ordinary," or "necessary." As required in the claims manual expenses must be deducted as paid. They may vary by month, and as a result require changes in benefits, or they may be stable over time. Whether the employed individual is eligible and the amount of his benefit is therefore completely dependent on his own individual circumstances.

Example: With earnings of \$697 and work expenses of \$127, the disregard provisions as amended by H.R. 12972 would result in the following calculation:

\$697 in earned income would be reduced by—	\$697
Disregard of first \$65 of monthly earnings (present law) -----	— 65
	<hr/>
	632
Disregard of 50 percent of additional earnings (present law) -----	— 316
	<hr/>
	316
Disregard of \$127 in work expenses (H.R. 12972) -----	— 127
	<hr/>
Amount of countable income remaining -----	189

With a monthly benefit amount of \$189, the individual with \$127 in work expenses would be ineligible because his countable income would be equal to the benefit amount. If, however, his work expenses were increased by \$1, his countable income would be \$188 and he would be eligible for \$1 in SSI benefits plus (in most States) medicaid benefits. (SSI law also provides for the disregard of \$20 a month of any type of income, earned or unearned. If this disregard were used to reduce countable earned (rather than unearned) income, the breakeven point for a person with earned income would be raised by \$20 a month.)

TABLE 2.—EARNED INCOME AND WORK EXPENSES OF
BLIND SSI RECIPIENTS,¹ DECEMBER 1975 TO DECEMBER 1977

	December 1975	December 1977
Number with earned income.....	4,860	5,302
Percent with earned income.....	6.5	6.9
Average monthly earned income.....	\$237	\$285
Number with excludable work ex- penses.....	1,846	2,848
Percent with earned income who claimed excludable work expenses.	38	54
Average monthly amount of exclud- able work expenses.....	\$108	\$127

¹ Receiving federally administered payments.

Source: Data provided by the Social Security Administration.

TABLE 3.—SUPPLEMENTAL SECURITY INCOME: NUMBER OF BLIND PERSONS RECEIVING FEDERALLY ADMINISTERED PAYMENTS BY MONTHLY AMOUNT OF EARNINGS AND EXCLUDABLE WORK EXPENSES, DECEMBER 1975

Amount of earnings	Excludable work expenses									
	Total	Under \$25	\$25 to \$49	\$50 to \$74	\$75 to \$99	\$100 to \$149	\$150 to \$199	\$200 to \$299	\$300 and over	
Total.....	1,846	434	289	266	257	301	170	75	54	
Under \$50.....	67	60	3	1	2	.....	1	.....	.....
\$50 to \$99.....	104	67	23	7	2	2	3	.....	.....
\$100 to \$119.....	67	26	15	13	4	6	2	1	.....
\$120 to \$149.....	85	34	23	17	3	5	1	2	.....
\$150 to \$199.....	137	58	42	13	11	2	10	1	.....
\$200 to \$249.....	185	58	33	50	24	11	4	5	.....
\$250 to \$299.....	184	49	24	39	43	17	6	6	.....
\$300 to \$349.....	216	35	36	41	40	40	14	4	6	
\$350 to \$399.....	262	23	35	36	64	76	19	5	4	
\$400 to \$499.....	255	10	22	26	46	91	42	10	8	
\$500 to \$599.....	149	9	19	10	11	36	44	10	10	
\$600 and over.....	135	5	14	13	7	15	24	31	26	

¹ Includes 1,829 adults and 17 children.

Source: Social Security Administration.

III. RELATED LEGISLATIVE PROPOSALS

A major reason given in support of H.R. 12972 is that it would remove a disincentive in present law for individuals who have serious impairments to seek employment. Present SSI law provides for a nine-month trial work period during which the disabled individual's earnings are not used in determining whether he is engaged in substantial gainful activity. After the nine-month period, however, if the individual has earnings which average \$240 a month, he will be considered to be engaging in substantial gainful activity and will lose his disability status. In addition to losing eligibility for SSI cash benefits, the individual may also lose eligibility for Medicaid benefits, which in some cases may be of greater dollar value than the SSI cash benefits. The individual may also lose eligibility for valuable social services, such as attendant care, depending on the provisions of the social services plan of the State in which he lives.

Disabled persons receiving title II benefits are subject to the same provisions for a trial work period and SGA earnings limitation as are SSI recipients. Title II beneficiaries who lose their eligibility for cash benefits also lose eligibility for medicare. Thus disabled individuals under both programs may face a substantial loss of benefits if they return to work. It is argued that the potential loss of these benefits inhibits disabled persons from attempting to re-enter the work force, particularly if they are unsure that their re-entry will be successful and will be sustained over time.

The House Social Security Subcommittee has recently reported a bill which includes several provisions described as responding to the work disincentive issues raised by the trial work and SGA provisions of present law. Although the House Social Security Subcommittee has jurisdiction only over title II and therefore its bill, H.R. 14084, would amend only that title, several of its provisions are equally applicable in principle to disability under title XVI:

1. H.R. 14084 would provide new experiment and demonstration authority by directing the Commissioner of Social Security to develop and carry out experiments and demonstration projects to determine the advantages and disadvantages of alternative methods of treating work activity, with the objective of encouraging disabled individuals to return to work.

2. In addition, the bill would extend the trial work period to a total of 24 months instead of the present 9 months. During the first 12 months of the trial work period the disabled individual would continue to receive benefits. During the second 12 months, benefits would be suspended but eligibility would not be terminated.

3. Medicare coverage would continue during the full 24-month trial work period and for an additional 24 months, for a total of 48 months.

4. There would be excluded from earnings used in determining ability to engage in substantial gainful activity the costs of certain extraordinary work expenses necessitated by an impairment sufficiently severe to result in a functional limitation requiring assistance to work. The bill provides for allowing these exclusions whether or not assistance is also needed to enable the individual to carry out his normal daily functions. Current

regulations provide for the exclusion of certain extraordinary work expenses in determining whether earnings constitute substantial gainful activity, but not if the expenses are for medications or equipment which are also necessary for normal daily functioning.

IV. GENERAL BACKGROUND INFORMATION

A. Brief Program History

When the supplemental security income program (SSI) began in January 1974, the majority of recipients were eligible for benefits on the basis of old age. By 1977 this situation had changed, with the majority receiving benefits on the basis of blindness or disability.

This development was not foreseen in 1972, when the SSI program was first enacted. Most of the discussion leading up to congressional passage of SSI centered on serving the aged population. Congress accepted estimates of the Administration indicating that the SSI population would continue to be composed largely of the aged. The Administration estimated that, by the end of fiscal year 1975, there would be almost two aged beneficiaries for every disabled beneficiary. While it was foreseen that the number of persons receiving disability benefits would grow under the new program, it was expected that the number of aged beneficiaries would grow even more.

The Administration's early estimates on the number of persons who would qualify for disability payments under the SSI program appear to have been developed somewhat haphazardly. It apparently relied primarily on the Survey of the Disabled conducted by the Department of Health, Education, and Welfare in 1966. Looking to the future, the Administration estimated that the annual growth rate for SSI disability would be 2 percent, as compared to Administration estimates of 5-percent caseload growth under the then existing law projected into the future.

Even the higher projection for existing law did not seem to take into account what had actually been happening under the program of aid to the permanently and totally disabled. In the period December 1968 through December 1971 the disability rolls increased from 702,000 to 1,068,000—an increase of 52 percent.

In its budget justification for 1974, the first year of the SSI program, the Administration estimated that by June 1974 there would be 3.1 million aged on the rolls, and 1.7 million disabled. In June 1974 there were actually 2.1 million aged and 1.5 million disabled on the rolls. The Administration also estimated at that time that by June 1975 there would be 3.8 million aged and 1.8 million disabled. The figure for the disabled turned out to be accurate—there were 1.8 million disabled persons receiving benefits in June 1975, but the figure for the aged was only 2.3 million. Moreover, the overall estimate for the disabled was realized even though the estimate for disabled children of 250,000 was still less than one-third realized.

In the 4½ years that the SSI program has now been in operation the number of aged and blind persons receiving benefits has remained relatively stable. The number of aged beneficiaries receiving federally administered payments grew from 1,865,000 in the first month of the

program to 2,016,000 in June 1978, an increase of only 8 percent. (The number of aged beneficiaries has actually declined about 13 percent since December 1975.) The number of blind beneficiaries grew from 72,000 in January 1974 to 77,000 in June 1978, an increase of only 7 percent. In contrast, the number of disabled grew from 1,278,000 in the first month of the program to 2,147,000 in June 1978, an increase of 68 percent. There has been an 11 percent increase since December 1975.

There are other program statistics which point up the changing nature of the SSI caseload. In January 1974 the disabled composed only 40 percent of the caseload. In June 1978 the disabled made up 51 percent of the caseload. In 1974, about 60 percent of all new applications for SSI were on the basis of blindness or disability. In the last 2½ years 80 percent of all applications have been made on this basis. In 1974, 43 percent of all SSI awards went to disabled individuals. In the last 2½ years about two-thirds of all awards have been for disability.

In summary, at the present time four out of five SSI applications are from individuals who claim to be disabled. Two out of every three awards go to persons who are determined to be disabled. And slightly more than one-half, 51 percent, of all current recipients are disabled.

Program expenditures reflect the change in recipient composition. In 1974, \$2.6 billion, or 50 percent of federally administered SSI expenditures, went to disabled persons. In 1977, \$3.6 billion, or 59 percent of expenditures, went to the disabled. The amount of SSI disability expenditures increased by 42 percent between 1974 and 1977, while overall program expenditures increased 20 percent.

TABLE 4.—NUMBER OF RECIPIENTS RECEIVING FEDERALLY ADMINISTERED SSI PAYMENTS, BY CATEGORY, 1974-78

(In thousands)

Year	Total	Aged	Blind	Disabled
January 1974.....	3,216	1,865	72	1,278
December 1974.....	3,996	2,286	75	1,636
December 1975.....	4,314	2,307	74	1,933
December 1976.....	4,236	2,148	76	2,012
December 1977.....	4,238	2,051	77	2,109
June 1978.....	4,240	2,016	77	2,147
Percent increase (January 1974 to June 1978).	32	8	7	68

Source: Data provided by the Social Security Administration.

TABLE 5.—SSI EXPENDITURES ¹

Year	Total	Disability	Disability as percent of total
1974.....	\$5,096,813	\$2,556,988	50
1975.....	5,716,072	3,072,317	54
1976.....	5,900,215	3,345,778	57
1977.....	6,134,085	3,628,060	59
Percent increase, 1974-1977.....	20	42	.....

¹ Federally administered payments.

Source: Data provided by the Social Security Administration.

TABLE 6.—NUMBER OF PERSONS INITIALLY AWARDED SSI PAYMENTS ¹

Year	Total SSI awards	Disabled	Disabled as percent of total
1974.....	890,768	387,007	43
1975.....	702,147	436,490	62
1976.....	542,355	365,822	67
1977.....	557,570	362,067	65
March 1978.....	52,110	34,520	66

¹ Federally administered payments.

Source: Data provided by the Social Security Administration.

TABLE 7.—SSI APPLICATIONS, BY CATEGORY, 1974 TO JULY 1978

Year	Total	Aged	Blind and disabled	Blind and disabled as a percent of total
1974.....	2,296,400	926,900	1,369,500	60
1975.....	1,498,400	377,400	1,121,000	75
1976.....	1,258,100	254,400	1,003,700	80
1977.....	1,298,400	258,500	1,039,900	80
January-July 1978.....	745,600	150,600	595,100	80

Source: Data provided by the Social Security Administration.

TABLE 8.—NUMBER OF PERSONS RECEIVING FEDERALLY ADMINISTERED SSI PAYMENTS, BY REASON FOR ELIGIBILITY AND STATE, JUNE 1978

State	Total	Aged	Blind	Disabled
Total ¹	4,239,874	2,016,110	77,193	2,146,571
Alabama ²	140,693	87,120	1,926	51,647
Alaska ²	3,148	1,284	65	1,799
Arizona ²	29,015	12,656	515	15,844
Arkansas.....	84,204	49,893	1,588	32,723
California.....	699,838	324,979	17,195	357,664
Colorado ²	33,366	16,113	347	16,906
Connecticut ²	22,892	8,077	302	14,513
Delaware.....	7,179	2,873	189	4,117
District of Columbia.....	14,572	4,414	203	9,955
Florida.....	165,912	87,504	2,558	75,850
Georgia.....	159,465	80,168	2,939	76,358
Hawaii.....	10,037	5,228	133	4,676
Idaho ²	7,820	3,157	98	4,565
Illinois ²	125,989	39,795	1,657	84,537
Indiana ²	41,190	17,489	1,057	22,644
Iowa.....	26,758	12,892	1,085	12,781
Kansas.....	22,007	9,736	331	11,940
Kentucky ²	95,909	48,972	2,038	44,899
Louisiana.....	146,520	77,446	2,197	66,877
Maine.....	22,700	11,138	268	11,294
Maryland.....	48,277	17,305	557	30,415
Massachusetts....	131,375	74,501	4,800	52,074
Michigan.....	116,963	43,282	1,664	72,017
Minnesota ²	35,082	15,270	641	19,171
Mississippi.....	117,612	69,820	1,874	45,918
Missouri ²	90,720	49,394	1,572	39,754
Montana.....	7,440	2,801	134	4,505
Nebraska ²	14,319	6,587	239	7,493
Nevada.....	6,091	3,456	367	2,268
New Hampshire ² ..	5,457	2,446	140	2,871
New Jersey.....	81,359	33,767	997	46,595
New Mexico ²	25,661	11,232	426	14,003
New York.....	382,015	151,657	3,970	226,388
North Carolina ² ...	144,857	70,646	3,404	70,807
North Dakota ²	7,174	3,962	74	3,138

See footnote at end of table.

TABLE 8.—NUMBER OF PERSONS RECEIVING FEDERALLY ADMINISTERED SSI PAYMENTS, BY REASON FOR ELIGIBILITY AND STATE, JUNE 1978—Continued

State	Total	Aged	Blind	Disabled ¹
Ohio.....	124,436	42,446	2,287	79,703
Oklahoma ²	75,315	41,518	1,083	32,714
Oregon ²	23,194	8,359	535	14,300
Pennsylvania.....	168,541	65,140	3,743	99,658
Rhode Island.....	15,489	6,415	172	8,902
South Carolina ² ..	83,721	41,979	1,892	39,850
South Dakota.....	8,683	4,530	135	4,018
Tennessee.....	134,657	69,061	1,824	63,772
Texas ³	272,958	165,455	4,096	103,407
Utah ²	8,272	2,806	149	5,317
Vermont.....	8,983	3,974	118	4,891
Virginia ²	79,885	38,668	1,446	39,771
Washington.....	49,315	17,711	513	31,091
West Virginia ²	42,702	16,570	646	25,486
Wisconsin.....	67,478	33,107	956	33,415
Wyoming ²	2,139	989	28	1,122
Unknown.....	11	5	.....	6
Other areas:				
Northern				
Mariana				
Islands ³	479	317	20	142

¹ Includes persons with Federal SSI payments and/or federally administered State supplementation, unless otherwise indicated.

² Data for Federal SSI payments only. State has State-administered supplementation.

³ Data for Federal SSI payments only; State supplementary payments not made.

Source: Social Security Administration.

B. Characteristics of the SSI Disabled Population

I. Disability-Related Characteristics

Type of impairment.—According to Social Security Administration data, nearly one-third, or 31 percent, of adults awarded federally administered disability payments in 1975 qualified on the basis of a mental disorder, including mental retardation. The next most prevalent type of impairment was a disease of the circulatory system, accounting for 21 percent of awards. Other types of impairments included diseases of the musculoskeletal system and connective tissue (13 percent); diseases of the nervous system and sense organs (10 percent); neoplasms (5 percent); endocrine, nutritional and metabolic diseases (5 percent); diseases of the respiratory system (5 percent); accidents, poisonings and violence (4 percent); and others (7 percent). (Table 9.)

Basis for adjudication.—Fewer than one-third, or 29 percent of adults awarded federally administered disability payments in 1975 had impairments meeting the medical listings that the Social Security Administration uses in determining disability. An additional 44 percent had impairments that equaled the listings. Twenty-six percent did not have impairments that either met or equaled the medical listings, but were determined to be disabled on the basis of vocational considerations. Of awards involving use of vocational factors, 30 percent had diseases of the musculoskeletal system, 29 percent had diseases of the circulatory system, and 11 percent had mental disorders. (Table 9.)

(Conditions that meet or equal the listings permit a finding of disability without a vocational evaluation. Less severe disabilities require a specific finding as to the individual's capacity for employment. See subpart C of part II of this document, page 4.)

II. Other Characteristics

Average payments.—The disabled receive higher average monthly payments than the aged, reflecting the fact that they have less income from other sources. In December 1977 there were 1.8 million disabled individuals and 69,000 couples receiving federally administered payments. Monthly payments averaged \$154 for individuals and \$194 for couples. For the aged, monthly payments averaged \$103 for individuals and \$142 for couples.

Living arrangements.—In December 1977, 83 percent of the disabled lived in their own homes (compared with 88 percent of the aged). About 12 percent of the disabled lived in the household of another, and 6 percent were in medicaid institutions.

Unearned income.—Thirty-five percent of disabled persons receiving SSI payments also received title II social security benefits, compared with 70 percent of the aged. The average monthly amount of the social security benefit was \$147 for both the disabled and the aged. About 10 percent of the disabled had unearned income other than social security benefits. For the disabled, the average amount was \$76. For disabled adults the most frequent sources of unearned income other than social security were veterans benefits (2.9 percent of disabled adults had VA income), and support and maintenance provided in kind (2.4 percent had this type of income).

Earned income.—The number and percentage of disabled recipients who have earned income have been increasing. In December 1977, 78,395 disabled persons, or 3.7 percent of all recipients, had earned income. This compares with 54,629 persons, or 2.8 percent of recipients, in December 1975. The average amount of monthly earned income increased from \$83 in December 1975 to \$91 in December 1977.

Sex and race.—According to December 1977 data, 60 percent of disabled recipients are women, and 65 percent are white. Among the aged, 65 percent are women, and 65 percent are white.

Age distribution.—About 27 percent of disabled adults in December 1977 were between the ages of 18 and 39. About 14 percent were age 40 to 49, 27 percent were age 50 to 59, and about 33 percent were age 60 and above.

TABLE 9.—NUMBER AND PERCENTAGE DISTRIBUTION OF BLIND AND DISABLED ADULTS AWARDED FEDERALLY ADMINISTERED SSI PAYMENTS, BY BASIS FOR ADJUDICATION AND DIAGNOSTIC GROUP, 1975

Diagnostic group	Total	Impairment meets level of severity in listings	Impairment equals level of severity in listings	Medical and vocational consideration	Medical, vocational consideration (older and unskilled)
Total number ¹	356,892	105,092	158,019	92,545	1,236
Total percent.....	100.0	100.0	100.0	100.0	100.0
Infective and parasitic diseases.....	1.6	1.8	1.7	1.2	.1
Neoplasms.....	5.4	7.8	6.0	1.8	1.0
Endocrine, nutritional, and metabolic diseases.....	5.0	3.2	4.7	7.7	2.5
Mental disorders.....	30.7	41.5	35.4	10.6	2.0
Mental retardation.....	13.1	25.5	11.1	2.6	.....
Diseases of the nervous system and sense organs.....	10.0	16.6	9.3	4.3	.4
Diseases of the eye.....	2.9	7.9	.8	.9	.1
Diseases of the circulatory system.....	20.7	13.0	20.6	29.0	50.8
Diseases of the respiratory system.....	4.7	4.7	3.6	6.7	5.1
Diseases of the digestive system.....	2.1	2.0	2.2	2.7	6.2

Diseases of the genitourinary system.....	1.0	1.7	.7	.6	.....
Diseases of the musculoskeletal system and connective tissue.....	12.7	2.0	9.4	30.2	28.5
Congenital anomalies.....	1.3	1.6	1.4	.8	.....
Accidents, poisonings, and violence (na- ture of injury).....	3.9	3.8	3.9	4.2	3.3
Other.....	.8	.3	1.1	.8	.....

¹ Excludes persons with prior entitlement to benefits under the social security program.

Source: Social Security Administration.

Note: Conditions which meet or equal the severity in the listings are sufficiently severe to allow a presumption of disability; other conditions require a specific vocational evaluation of the individual's capacity for employment. See subpart C of part II of this document.

TABLE 10.—EARNED INCOME OF DISABLED SSI RECIPIENTS,¹
DECEMBER 1975 TO DECEMBER 1977

	December 1975	December 1977
Number with earned income.....	54,629	78,395
Percent with earned income.....	2.8	3.7
Average monthly earned income.....	\$83	\$91

¹ Receiving federally administered payments.

Source: Data provided by the Social Security Administration.

TABLE 11.—NUMBER AND PERCENTAGE DISTRIBUTION OF
PERSONS RECEIVING FEDERALLY ADMINISTERED SSI PAY-
MENTS, BY REASON FOR ELIGIBILITY, SEX, AND RACE,
DECEMBER 1977

Sex and race	Total	Aged	Blind	Disabled
Total number.....	4,237,692	2,050,921	77,362	2,109,409
Total percent....	100.0	100.0	100.0	100.0
SEX				
Men.....	34.7	28.5	43.9	40.5
Women.....	65.1	71.4	55.9	59.3
Not reported.....	.2	.1	.2	.2
RACE				
White.....	65.1	65.4	63.6	64.8
Black.....	27.3	24.6	28.8	29.8
Other.....	3.0	3.2	3.1	2.8
Not reported.....	4.6	6.8	4.5	2.6

Source: Social Security Administration.

TABLE 12.—AGE DISTRIBUTION OF DISABLED ADULT SSI
RECIPIENTS, DECEMBER 1977

Age	Percent
18 to 21.....	4.1
22 to 29.....	11.8
30 to 39.....	11.0
40 to 49.....	13.8
50 to 59.....	26.6
60 to 64.....	18.4
65 to 74.....	14.0
75 and over.....	.3

Source: Data provided by the Social Security Administration.

C. Procedures for Determining Continuing Disability

Disability determinations for the title II and title XVI programs are made by State agencies under contract with the Social Security Administration. The State agencies make their determinations on the basis of medical evidence and also by examining the individual's work history. Once an individual is determined to be disabled, there is relatively little likelihood that he will have to undergo a subsequent disability determination if no earnings are reported to his wage record. Although Social Security's rules require a redetermination of non-disability factors for SSI recipients every 12 months, there is no requirement for regular periodic redetermination of disability.

The Social Security Claims Manual instructs State agencies on certain kinds of cases that are to be selected for investigation of continuing entitlement to disability benefits by means of a medical examination diary procedure. The agencies are cautioned that most allowed cases involve chronic, static, or progressive impairments subject to little or no medical improvement. In others, even though some improvement may be expected, "the likelihood of finding objective medical evidence of 'recovery' has been shown by case experience to be so remote as not to justify establishing a medical reexamination diary." In general, according to the claims manual, cases are to be "diaried" for medical reexamination only if the impairment is one of 13 specifically listed impairments. The diary categories include tuberculosis, functional psychotic disorders where onset occurred within the two preceding years, functional nonpsychotic disorders, active rheumatoid arthritis without deformity, cases in which corrective surgery is contemplated, obesity, fractures without severe functional loss or deformity, infections, peripheral neuropathies, sarcoidosis without severe organ damage, progressive neoplastic disease is probable but there is no definitive diagnosis, neoplastic disease which has been treated and incapacitating residuals exist but improvement of the residuals is probable, and epilepsy.

The high degree of selectivity used in selecting cases for medical reexamination is illustrated by the following statistics for title II. In

1977, there were about 2.7 million disabled workers in current pay status. The number of continuing disability investigations in that year for disabled workers was only about 150,000.

It is clear from the procedures followed and from program statistics that disabled individuals frequently remain on the disability rolls for extended periods without any reexamination of their medical condition. Unless there is a voluntary report of recovery or rehabilitation, or there is a report of work activity or earnings, an individual will generally continue indefinitely to receive benefits without any followup on his situation. The House Subcommittee on Social Security has included a provision in H.R. 14084 to require a review of the status of disabled title II beneficiaries at least once every 3 years unless the adjudicator who makes the State agency disability determination makes a finding that the individual is under a disability which is permanent.

The Social Security Administration has recognized the issue raised by this failure to conduct reexaminations of persons who have been on the disability rolls for an extended period and is now developing an ongoing sample study of DI and SSI disability cases which have never been subjected to a medical continuing disability investigation. The purposes of the study, according to SSA, are to gather information on changes that may be needed in the medical reexam criteria and to determine the extent to which disability beneficiaries may be erroneously on the rolls.



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